2006 FOR PROFIT CORPORATION ANNUAL REPORT

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Jun 19, 2006 8:00 am
Secretary of State
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05-16-2006 90178 002 ***150.00

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02102006 No Chg-P CR2E034 (11/05)

DOCUMENT # 684374

1. Entity Name
RAMSEY PAINT & BODY, INC.

Principal Place of Business	Mailing Address
209 S.W. 15TH STREET FT LAUDERDALE, FL 33315	209 S.W. 15TH STREET FT LAUDERDALE, FL 33315

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2206440
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RAMCHARRAN, RONALD
209 SW 15TH STREET
FT LAUDERDALE, FL 33315

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PVST
NAME	RAMCHARRAN, RONALD
STREET ADDRESS	209 S.W. 15TH STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33315
TITLE	D
NAME	RAMCHARRAN, RONALD
STREET ADDRESS	209 S.W. 15TH STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33315
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Randolph Ramcharran 6/14/06 954-522-4165
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #